PTO/S0/06 (08-03)

Approved for use through 7/31/2006, OMB 0651-0032 U.S. Patert and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1935, no persons are required to respond to a collection of information unless it displays a valid QMB control nu PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I ÓR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) RATE MANSER EXTRA RATE FEE MUMBER FRED FOR BASIC FEE OR (37 CFR 1.16(a)) 0 TOTAL CLAILS OR minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS OR 3 × OR (37 CFR 1.15(6)) MULTIPLE DEPENDENT CLARA PRESENT OR TOTAL TOTAL " If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II OTHER THAN OR (CO (m) 2) SMALL ENTITY SMALL ENTITY (Cotumn 3) (Column 1) CLAIMS HIGHEST ADDI-RATE PRESENT ADDI RATE 4 NUMBER REMAINING TIONAL TIONAL **EXTRA** PREVIOUSLY ENDMENT **AFTER** FEE FEE PAID FOR MENDMENT Total OR CH CER LANCE x s OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 3) (Column 2) (Column 1) 14,12,13,14,15,16,17, HIGHEST CLARAS ADDI-400A JASIOH RATE PRESENT RATE I:UI:GER REMARING TIONAL EXTRA" AFTER PREVIOUSLY FEE FEE PAIDFOR ALIENDIAEUT Ations 20 OR Minus OR Z OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)) TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS RATE ACCIA PRESENT RATE ADDI-O REMAINING MUMBER TIONAL TIONAL EXTRA PREVIOUSLY AFTER FEE FEE PAID FOR AMENDMENT Minus Total (3) CFR 1.16(d) OR AMENDM Minus (37 CFR 1.16(b)) OR OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) TOTAL

This collection of information is required by 37 CFR 1.16. The information of properties of the process an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, proparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complote this form and/or suggestions for reducing this burdon, should be sent to the Chief Information Officer, U.S. Patent and Tradomark Office, U.S. Department of Commorce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL

ADD'L FEE

ADD'L FEE

OR

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

H thu "Highwest " mare Proviously Paid For IN THIS SPACE is less than 3, order "3".